

INTERDISTRICT PUBLIC SCHOOL CHOICE
NOTICE OF ACCEPTANCE
TO PARENT/LEGAL GUARDIAN OF STUDENT APPLICANT
(SAMPLE)

TO: (Name of Parent/Legal Guardian)
 (Address)

FROM: (Name), Superintendent
 (Name of Choice District)

DATE: *[first cycle: January 6, 2004] [second cycle: May 5, 2004]*

We are pleased to inform you that (Name of student applicant) has been accepted as a choice program student in (Name of Choice District) in grade (enter grade) at (Name of school) for enrollment beginning in September 2004.

Attached you will find a Notice of Intent to Enroll form. If you intend to enroll the student named above in (Name of choice district) for the 2004-2005 school year, you must complete the Notice of Intent to Enroll and return it to (Name of choice district) no later than *[first cycle: January 15, 2004] [second cycle: May 17, 2004]*.

Please be aware that filing the Notice of Intent to Enroll with (Name of choice district) obligates the student named above to remain enrolled in (Name of choice district) for at least the entire 2004-2005 school year.

Due to parent or legal guardian by [first cycle: January 6, 2004] [second cycle: May 5, 2004]